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	Attorney Docket Num	ber NTZ 0108 PCT		
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	PIERRE GERARD NIEWLAND		
PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number	APPLIED FOR		
Declaration Declaration	Filing Date	HEREWITH		
Submitted OR Submitted after Initial with Initial Filing (surcharge	Group Art Unit			
Filing (37 CFR 1.16 (e)) required)	Examiner Name			

	required)	Examiner Name						
As a below named inventor, I hereby declare that:								
My residence, mailing address, an	d citizenship are as stat	ed below next to my nam	e.					
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
MICRO FILTER DEVICE FOR A	AN IN LINE FILTERING	CONFIGURATION						
	(Title of ti	he Invention)	· · · · · · · · · · · · · · · · · · ·					
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY)		as United St	ates Application l	Number or PCT In	ternational			
Application Number	and was a	amended on (MM/DD/YY	YY)		(if applicable).			
I hereby state that I have reviewed amended by any amendment spec	l and understand the co- cifically referred to above	ntents of the above ident e.	ified specification	, including the clai	ms, as			
I acknowledge the duty to disclose in-part applications, material inform								
PCT international filing date of the	continuation-in-part app	olication.	•					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other								
	than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s) Country		Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	y Attached? NO			
PCT/IB 2003/004079	EP	19/09/2003			V			
02078889.9	EP	19/09/2002			<b>V</b>			
Additional foreign application	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

PTO/SB/01 (03-01)
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# **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: I 4/ I	Customer Numb or Bar Code Lab	1 0272	56	OR V	Correspondence address below		
ROBERT P. RENKE ARTZ & ARTZ, P.C. Name							
28333 TELEGRAPH ROAD SUITE 250 Address							
SOUTHFIELD City			State	МІ	ZIP 48034		
U.S.A. Country	Te	248-223 elephone	-9500		248-223-9522 Fax		
I hereby declare that all statements ma are believed to be true; and further tha made are punishable by fine or impriso validity of the application or any patent is	t these stateme nment, or both,	nts were made wit	h the kı	nowledge that willful	I false statements and the like so		
NAME OF SOLE OR FIRST INV	'ENTOR :	A petition h	as be	en filed for this u	nsigned inventor		
Given Name (first and middle [if any])	PIERRE GER	ARD		ly Name ırname	NIEWLAND		
Inventor's Signature					Date		
Residence: City MAASS	LUIS	State		NETHERLANDS Country	NETHERLANDS Citizenship		
P.O. BOX 25 Mailing Address							
City MAASSLUIS		State	•	NL-3140 AA <b>ZIP</b>	NETHERLANDS Country		
NAME OF SECOND INVENTOR	રઃ 📗 🗀	A petition ha	s beer	n filed for this un	signed inventor		
Given Name (first and middle [if any])	WILLY			y Name rname	SCHAERLAECKENS		
Inventor's Signature					Date		
ROTTER	DAM	State	c	NETHERLANDS	NETHERLANDS Citizenship		
SYDNEYSTRAAT 60 Mailing Address							
ROTTERDAM		State	z	NL-3047 BP	NETHERLANDS Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

PTO/SB/02A (09-04)
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### **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet

A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Family Name or Surname Given Name (first and middle (if any)) **BORGER** RON Inventor's Date Signature **NETHERLANDS NETHERLANDS** ROTTERDAM State Country Citizenship Residence: City SYDNEYSTRAAT 60 Mailing Address NETHERLANDS NETHERLANDS NL-3140 AA State Zip Country City Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City Mailing Address Zip State Country City Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Family Name or Surname Given Name (first and middle (if any)) Inventor's Date Signature State Country Citizenship Residence: City Mailing Address Zip State

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TO 2 1 WATE SER (1504) or use through 11/30/2005. OMB 0651-0035 Office; U.S. DEPARTMENT OF COMMERCE

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U.S. Patent and Tradema

### **POWER OF ATTORNEY** and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	APPLIED FOR
Filing Date	HEREWITH
First Named Inventor	PIERRE GERARD NIEWLAND
Title	MICRO FILTER DEVICE FOR AN IN LINE FILTERING CONFIGURATION
Art Unit	
Examiner Name	
Attorney Docket Number	NTZ 0108 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.							
I hereby appoint:							
	sociated with the Customer Number:		027256	6			
OR		1					
Practitioner(s) n	amed below:						
	Name	:		Registration Numb	er		
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	or agent(s) to prosecute the application	n identified above	, and to trar	nsact all business in the	United States Patent and		
Trademark Office conn							
	nange the correspondence address fo	r the above-identi	fied applicat	ion to:			
	associated with the above-mentioned	Customer Number	er:				
OR							
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I am the:  Applicant/Inve	entor						
		FR 3.71.					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Signature	RON BORGER			Date			
Name				Telephon	e		
Title and Company							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
*Total of 3	forms are submitted.						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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and
CORRESPONDENCE ADDRESS
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	Application Number	APPLIED FOR
	Filing Date	HEREWITH
	First Named Inventor	PIERRE GERARD NIEWLAND
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	Art Unit	
	Examiner Name	
	Attorney Docket Number	NTZ 0108 PCT

l hereby revoke a	II previo	ous powers of attorney given i	n the above-identified	application.		
I hereby appoint:		, ,				
	sociated	with the Customer Number:	027256			
Practitioner(s)	named be	low:				
		Name	F	Registration Number		
				<del></del>		
as my/our attorney(s) Trademark Office con			fied above, and to transact	all business in the United States Patent and		
Please recognize or o	hange the	e correspondence address for the ab	ove-identified application to	:		
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OR lhe address	associat	ed with the above-mentioned Custon	ner Number:			
│	s associa	ted with Customer Number:				
Firm or						
Address	Ivanie					
City			State	Zip		
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Telephone			Fax			
	l am the:  Applicant/Inventor.					
Assignee of Statement u	Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record						
Signature	PIERRE	GERARD NIEWLAND	<del></del>	Date		
Name				Telephone		
Title and Company						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
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Filing Date	HEREWITH
First Named Inventor	PIERRE GERARD NIEWLAND
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Art Unit	
Examiner Name	
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I hereby revoke a	I hereby revoke all previous powers of attorney given in the above-identified application.					
I hereby appoint:						
✔ Practitioners a	ssociated with the Custo	mer Number:	027256			
OR		L				
Practitioner(s)	named below:					
ſ <del>-</del>	Name		R	Registration Number		
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as my/our ottornov(s)	or agent(a) to proceed	the application identific	d above, and to transact a	all business in the United States	Patent and	
Trademark Office cor		the application identifie	u above, and to transact a	in business in the Office States		
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I am the:			l ax			
	rentor					
	Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature	WILLY SCHAERLAEC	KENS		Date		
Name				Telephone		
Title and Company						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
*Total of 3	forms are subr	mitted.				

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